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AMENDMENT TRANSMITTAL LETTER			DOCKET NUMBER: P-IX 4526	
SERIAL NO: 09/727,311	FILING DATE: November 29, 2000	EXAMINER: K. Davis	GROUP ART UNIT: 1636	
INVENTION: SURFACE EXPRESSION LIBRARIES OF RANDOMIZED PEPTIDES				



TO COMMISSIONER FOR PATENTS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C., 20231 on August 22, 2002.

By: Astrid R. Spain  
Astrid R. Spain, Reg. No. 47,956

August 22, 2002  
Date of Signature

Transmitted herewith is a Response to the Office Action mailed February 22, 2002, in the above-identified application.

- ☒ Small Entity status of this application has been established under 37 CFR 1.27.
- ☒ Petition for Three-Month Extension of Time is enclosed (in duplicate).
- ☒ Appendix A.
- ☐ Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- ☒ No additional claims fee is required.
- ☐ An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
						SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	5	- 20	-	0	x	\$9	\$18	=	\$0	\$
INDEPENDENT CLAIMS	3	- 3	-	0	x	\$42	\$84	=	\$0	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO		\$140	\$280	=	\$0	\$
						TOTAL ADDITIONAL FEE			\$0	\$

\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

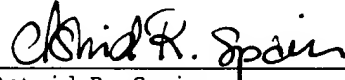
☐ Please charge my Deposit Account No. 03-0370 the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is enclosed.

BEST AVAILABLE COPY

Inventor: William D. Huse  
Serial No.: 09/727,311  
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- X A check in the amount of \$460.00 is enclosed, which covers the fee for a three-month extension of time.
- X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 03-0370. A duplicate copy of this sheet is enclosed.
- X The Commissioner is hereby authorized to charge to Deposit Account No. 03-0370 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



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